



higher education & training

Department:
Higher Education and Training
REPUBLIC OF SOUTH AFRICA

REGULATIONS FOR THE REGISTRATION OF PRIVATE HIGHER EDUCATION INSTITUTIONS

APPLICATION FOR REGISTRATION AS A PRIVATE HIGHER EDUCATION INSTITUTION

(Form APX-01)

Note: Applicants must consult the document: *A Guide for Completing the Application for Registration as a Private Higher Education Institution*.

A. ADMINISTRATIVE DATA

1. Legal name of the applicant

| |
|--|
| |
|--|

2. Particulars of authorised contact person

- a) Name

| |
|--|
| |
|--|

- b) Designation of contact person (e.g. MD, Principal, Head of Academic Affairs)

| |
|--|
| |
|--|

- c) Telephone number

| |
|--|
| |
|--|

- d) Fax number

| |
|--|
| |
|--|

- e) E-mail address

| |
|--|
| |
|--|

3. Postal address of the applicant

| | |
|------|--|
| | |
| | |
| | |
| Code | |

4. Physical address and contact details of head office

| | |
|----------------|--|
| | |
| | |
| | |
| Code | |
| Telephone | |
| Fax | |
| E-mail address | |

5. Physical address and contact details of main campus

| | |
|----------------|--|
| | |
| | |
| | |
| Code | |
| Telephone | |
| Fax | |
| E-mail address | |

6. Website address

| |
|--|
| |
|--|

B. COMPANY REGISTRATION AND GOVERNANCE PARTICULARS

7. Legal name of the applicant (same as in Item 1)

| |
|--|
| |
|--|

8. Official trading name, abbreviation, acronym or translation (if applicable)

| |
|--|
| |
|--|

9. Type of juristic person

| |
|--|
| |
|--|

10. Company registration number

| |
|--|
| |
|--|

11. Indicate whether the applicant is a local or foreign juristic person

| |
|--|
| |
|--|

12. If foreign, indicate the country of origin

| |
|--|
| |
|--|

13. Details of the parent institution

a) Name of the parent institution

| |
|--|
| |
|--|

b) Name of the head of the parent institution

| |
|--|
| |
|--|

c) Postal address

| | |
|------|--|
| | |
| | |
| | |
| Code | |

d) Physical address

| | |
|------|--|
| | |
| | |
| | |
| Code | |

e) Telephone number

f) Fax number

g) E-mail address

h) Website address

14. Particulars of the Management

a) Chief Executive Officer or head of the institution

i) Name

ii) Title

iii) Identity number (passport number and citizenship if not South African)

iv) Telephone number(s) including cellular phone number, if available

v) Fax number

b) Names and identity numbers of the applicant's current directors

| Surname & Initials | Title | Designation | Identity Number | Passport number |
|--------------------|-------|-------------|-----------------|-----------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

15. *Domicilium citandi et executandi* and contact details of the applicant

| | |
|----------------|--|
| | |
| | |
| | |
| Code | |
| Telephone | |
| Fax | |
| E-mail address | |

16. Holding company or any other organisation to which the applicant is subordinate

| |
|--|
| |
|--|

17. Relationship between the applicant and the holding company or other organisation

| |
|--|
| |
|--|

18. List of owners in accordance with the Articles of Association

| Surname & Initials | Title | Identity Number |
|--------------------|-------|-----------------|
| | | |
| | | |
| | | |
| | | |
| | | |

19. Details of the applicant's auditors

a) Name of the applicant's auditor

b) Registration number issued by the Public Accountants' & Auditors' Board

20. Tax and business registration details

a) VAT Registration Number

b) Income Tax Number

c) Business Registration Number

C. PARTICULARS OF LEARNING PROGRAMMES

21. Table 01: Programmes submitted to the HEQC for accreditation

| Name of programme | Entrance requirements | Mode of delivery | Language of instruction | Minimum duration in months | Contact with students | |
|-------------------|-----------------------|------------------|-------------------------|----------------------------|-----------------------|-----------|
| | | | | | Full-time | Part-time |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

22. Table 02: Proposed sites for programme delivery

| Name | Physical address | Programmes to be delivered |
|------|------------------|----------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

D. STAFF AND STUDENT DATA

23. **Table: 03:** Total staff expected to be employed and students to be registered for higher education programmes during the first three years of operation. The data should be expressed as **headcount only**.

| | Year 1 | Year 2 | Year 3 |
|---------------------------------|--------|--------|--------|
| Students | | | |
| | | | |
| | | | |
| Academic /Research staff | | | |
| Full-time | | | |
| Part-time | | | |
| Support staff | | | |
| Full-time | | | |
| Part-time | | | |
| Service staff | | | |
| Full-time | | | |
| Part-time | | | |

24. **Table 04:** Data for each higher education programme.

| NQF field | NQF level | Name of the programme | Student headcount enrolment | | |
|-----------|-----------|-----------------------|-----------------------------|--------|--------|
| | | | Year 1 | Year 2 | Year 3 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

25. **Table 05:** Higher education programmes for which the applicant provides or proposes to provide support on behalf of another institution.

| NQF field | NQF level | Name of the programme | Certifying institution | Student headcount enrolment | Nature of support |
|-----------|-----------|-----------------------|------------------------|-----------------------------|-------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

E. DATA ON FET AND GET PROGRAMMES

26. (a) Do you offer any programmes in the GET band?

- (b) If yes, provide the provincial registration number as an independent school or ABET Centre

27. Do you offer any programmes in the FET band?

28. **Table: 06:** Total teaching staff employed and learners enrolled, expressed as headcount, for the GET and FET programmes.

| | GET | FET |
|-----------------------|-----|-----|
| | | |
| Teaching staff | | |
| Headcount | | |
| | | |
| Students | | |
| Headcount | | |
| | | |
| | | |

F. FINANCIAL VIABILITY REPORTS AND LEGAL DOCUMENTS

- 29. **ANNEXURE A(1)**: Audited annual financial statements **OR** Audited financial forecasts.
 - 30. **ANNEXURE A(2)**: Business Plan.
 - 31. **ANNEXURE A(3)**: Surety agreement.
 - 32. **ANNEXURE B**: Company registration documents.
 - 33. **ANNEXURE C**: Occupational health and safety compliance audit report(s).
 - 34. **ANNEXURE D**: Business registration certificate.
-

G. QUALITY ASSURANCE AND MONITORING

- 35. **ANNEXURE E**: Declaration on application for accreditation.
 - 36. **ANNEXURE F**: Undertaking on institutional capacity.
 - 37. **ANNEXURE G**: Declaration on monitoring and evaluation.
-

H. INTER-INSTITUTIONAL AGREEMENTS AND MARKETING INFORMATION

- 38. **ANNEXURE H**: Inter-institutional agreements.
 - 39. **ANNEXURE I**: Student prospectus, calendar or brochure.
-

I. ADMISSION INFORMATION AND STUDENT RULES

- 40. **ANNEXURE J**: Enrolment forms, student contracts and rules and regulations.
-

J. DECLARATION ON NON-DISCRIMINATION

- 41. **ANNEXURE K**: Non-discrimination declaration.
-

K. ADDITIONAL INFORMATION TO BE SUBMITTED BY FOREIGN APPLICANTS ONLY

- 42. **ANNEXURE L**: Declaration on equality of qualifications.
- 43. **ANNEXURE M(1)**: Proof of recognition in the country of origin.

44. **ANNEXURE M(2)**: Proof of accreditation in the country of origin.